

F305

Hemodialysis Fistula Maturation Study (HFM/MANVAS Studies) Assess Clinical Maturation Form (Form # 305)

Begin using this form after the first successful cannulation. Complete this form for **every dialysis session** after the first successful cannulation until a Maturation Assessment Schedule Report from the DCC tells you to use another frequency of data collection. (Continue to complete Monthly Follow up Form 300 every month.)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="F"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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1. Identification Number PID 2. Alphacode AC 3. Visit Week Number VIST 4. Date of dialysis session: mm/dd/yyyy VISIT_DT

5. a. Status of study fistula use FISTULA_STAT
 1 = study fistula was used **with two needles** throughout the entire dialysis session
 2 = study fistula was used this entire session but for some portion of the session only one needle was used
 3 = study fistula was used for part of this dialysis session
 4 = study fistula was not used. It appears to be fine but the patient is not allowing use.
 5 = study fistula was not used for some reason other than patient preference.
 6 = dialysis session missed
 7 = study fistula will not be used for dialysis in the immediate future (i.e., for at least one month)
 8 = no dialysis session expected
 9 = unknown if study fistula used, two needles used, or used the entire session
 10 = patient was in a hospital or other institution and dialysis session information was not available
- b. Patient's current dialysis unit (Use HFM Study dialysis unit code number)..... CURR_UNIT

6. Date of the Maturation Assessment Schedule Report in use (mm/dd/yyyy) ASSESS_USE_DT

Note: Use the date of the dialysis session or the date of the weekly maturation e-mail from the DCC

7. Current assessment schedule frequency (from Schedule Report)..... ASSESS_FREQ
 (1=every session, 2=once a week, 3=every two weeks, 4=once a month)

Note: Use code=1 unless otherwise advised by the DCC

If Item 5=1, used with two needles throughout the entire dialysis session, complete pump speeds below (record blood pump speeds for each 30 minute increment as listed below. If more than one speed is recorded within a 30 minute increment, choose the one that is closest to the 30 minute time increment for that question. If two times are equidistant from the stated time, use the earlier time). Do not include any pump speed data from the last 15 minutes of dialysis. For MANVAS patients, please enter blood pump speeds for at least every hour (60 min, 120 min, 180 min, etc.)

8. a. Time dialysis started (24 hour clock HH:MM) DIAL_START_TM
 b. Dialysis machine blood pump speed at Time 30 min (15-44 min)..... BP_SPEED_30
 c. Dialysis machine blood pump speed at Time 60 min (45-74 min)..... BP_SPEED_60
 d. Dialysis machine blood pump speed at Time 90 min (75-104 min)..... BP_SPEED_90
 e. Dialysis machine blood pump speed at Time 120 min (105-134 min)..... BP_SPEED_120
 f. Dialysis machine blood pump speed at Time 150 min (135-164 min)..... BP_SPEED_150
 g. Dialysis machine blood pump speed at Time 180 min (165-194 min)..... BP_SPEED_180
 h. Dialysis machine blood pump speed at Time 210 min (195-224 min)..... BP_SPEED_210
 i. Dialysis machine blood pump speed at Time 240 min (225-254 min)..... BP_SPEED_240
 j. Dialysis machine blood pump speed at Time 270 min (255-284 min)..... BP_SPEED_270

- k. Dialysis machine blood pump speed at Time 300 min (285-314 min)..... BP_SPEED_300
- l. Dialysis machine blood pump speed at Time 330 min (315-344 min)..... BP_SPEED_330
- m. Dialysis machine blood pump speed at Time 360 min (345-374 min)..... BP_SPEED_360
- n. Dialysis machine blood pump speed at Time 390 min (375-404 min)..... BP_SPEED_390
- o. Dialysis machine blood pump speed at Time 420 min (405-434 min)..... BP_SPEED_420
- p. Dialysis machine blood pump speed at Time 450 min (435-464 min)..... BP_SPEED_450
- q. Dialysis machine blood pump speed at Time 480 min (465-494 min)..... BP_SPEED_480
- r. Dialysis machine blood pump speed at Time 510 min (495-524 min)..... BP_SPEED_510
- s. Dialysis machine blood pump speed at Time 540 min (525-554 min)..... BP_SPEED_540
- t. Dialysis machine blood pump speed at Time 570 min (555-584 min)..... BP_SPEED_570
- u. Dialysis machine blood pump speed at Time 600 min (585-615 min)..... BP_SPEED_600
- uu. End date of dialysis session if different from start date..... DIAL_END_DT
- v. Time dialysis ended (24 hour clock HH:MM) DIAL_END_TM

- 200. Date this form completed (mm/dd/yyyy) COMP_DT
- 201. Username of person completing/reviewing completeness of this form.....COMP_USER

Clinical Center Use Only
Date Form Entered (mm/dd/yyyy) __ __/__ __/__ __ __ __ ENTER_DT
Username of person entering this form__ __ __ __ __ __ __ ENTER_USER